

OFE ON THE WITTER

Attorney Docket No.

Patent 012150-101

## PIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Frank Kienzler et al.

Application No.: 10/662,359

Filing Date:

September 16, 2003

Title: FUSE DEVICE FOR PROJECTILE

Group Art Unit: 3641

**Examiner: Troy Chambers** 

Confirmation No.: 9420

## AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:								
Enc	losed is a reply for the above-identified patent application.							
	A Petition for Extension of Time is also enclosed.							
	Terminal Disclaimer(s) and the \$\infty\$\$ \$55.00 (2814) \$\infty\$\$ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. \ 1.20(d) are also enclosed.							
X	Also enclosed is/are REPLACEMENT SHEET (FIGS, 2-5)							
	Small entity status is hereby claimed.							
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the   ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).							
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.							
	Applicant(s) previously submitted							
	on, for which continued examination is requested.							
	Applicant(s) requests suspension of action by the Office until at least, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.							
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.							

Attorney Docket No. 012150-101
Application No. 10/662,359

×	No additional claim fee is required.
	An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS							
	No. of Claims	Highes of Cla Previo Paid	aims ously		Extra Claims	Rate	Additional Fee
Total Claims	4	MINUS	20	=	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims	1	MINUS	3 :	=	0	x \$88.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$300.00 (1203)							
Total Claim Amendment Fee						\$ 0.00	
Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee						\$ 0.00	
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT							\$ 0.00

A check in the amount	of	_ is enclosed for the fee due
Charge	to Deposit Acco	ount No. 02-4800.
Charge	to credit card.	Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: December 2, 2004

Alan E. Kopecki

Registration No. 25,813